

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		<b>Attorney Docket Number</b>	A2-065 US
		<b>First Named Inventor</b>	Makhlin et al.
<b>COMPLETE IF KNOWN</b>			
		<b>Application Number</b>	10/602,513
		<b>Filing Date</b>	06/24/2003
		<b>Art Unit</b>	
		<b>Examiner Name</b>	

*NOV 06 2003*

*U.S. PATENT & TRADEMARK OFFICE*

*O I P E*

Declaration Submitted with Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

OR

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ROTATIONALLY ADJUSTABLE FIBER OPTIC CONNECTOR***(Title of the Invention)*

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY)

06/24/2003

as United States Application Number or PCT International

Application Number

10/602,513

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

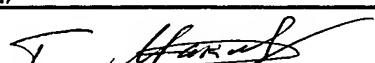
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

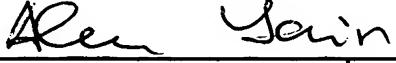
[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label	OR	<input type="checkbox"/>	Correspondence address below						
<p>Romi Bose Molex Incorporated Name</p> <p>2222 Wellington Court</p> <p>Address</p> <table border="1"> <tr> <td>Lisle City</td> <td>Illinois State</td> <td>60532 ZIP</td> </tr> <tr> <td>USA Country</td> <td>630/527-4419 Telephone</td> <td>630/416-4962 Fax</td> </tr> </table> <p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>						Lisle City	Illinois State	60532 ZIP	USA Country	630/527-4419 Telephone	630/416-4962 Fax
Lisle City	Illinois State	60532 ZIP									
USA Country	630/527-4419 Telephone	630/416-4962 Fax									
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name Ilya (first and middle [if any])		Family Name Makhlin									
Inventor's Signature 		Date 10.21.02									
Residence: City Wheeling		Illinois State	USA Country	USA Citizenship							
Mailing Address 492 South Kiowa Trail											
City Wheeling		Illinois State	60090 ZIP	USA Country							
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name Aleksander (first and middle [if any])		Family Name Yazvin									
Inventor's Signature		Date									
Residence: City Glenview		Illinois State	USA Country	USA Citizenship							
Mailing Address 4000 Triumvera Apartment 204											
City Glenview		Illinois State	60025 ZIP	USA Country							
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.											

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number _____ <input type="checkbox"/> OR <input type="checkbox"/> Correspondence address below			
Name Romi Bose Molex Incorporated 2222 Wellington Court			
Address City Lisle Illinois 60532			
Country USA Telephone 630/527-4419 Fax 630/416-4962			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR : <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Ilya (first and middle [if any])		Family Name Makhlin	
Inventor's Signature		Date	
Residence: City Wheeling		State Illinois	Country USA
Mailing Address City Wheeling		Citizenship USA	
492 South Kiowa Trail			
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Aleksander (first and middle [if any])		Family Name Yazvin	
Inventor's Signature 		Date 8/11/03	
Residence: City Glenview		State Illinois	Country USA
Mailing Address Apartment 204 4000 Triumvera			
City Glenview		State Illinois	ZIP 60025
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Vyacheslav	Family Name or Surname Malevanets		
Inventor's Signature <i>Vyacheslav Malevanets</i>		Date <u>5.12.03</u>	
Residence: City Vernon Hills	State Illinois	Country USA	Citizenship Ukraine
Mailing Address 964 Vernon Court			
Mailing Address City Vernon Hills      Illinois State      ZIP 60065-61      USA Country			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Malcolm R.	Family Name or Surname Phifer		
Inventor's Signature <i>Malcolm Phifer</i>		Date <u>10-27-03</u>	
Residence: City Lisle	State Illinois	Country USA	Citizenship USA
Mailing Address 5880 Forestview Road			
Mailing Address Apartment C			
City Lisle	Illinois State	ZIP 60532	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Barbara	Family Name or Surname Grzegorzewska		
Inventor's Signature <i>Barbara Grzegorzewska</i>		Date <u>5.12.03</u>	
Residence: City Chicago	State Illinois	Country USA	Citizenship USA
Mailing Address 6847 West 64th Street			
Mailing Address City Chicago      Illinois State      ZIP 60638      USA Country			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 4 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Igor		Family Name or Surname Grois	
Inventor's Signature <i>Igor Grois</i>		Date 12/05/2003	
Residence: City Northbrook	State Illinois	Country USA	USA Citizenship
Mailing Address 4010 Greenacre Drive			
Mailing Address			
City Northbrook		Illinois State State	60062 ZIP ZIP
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.